

MAIL TO:
Office of the Attorney General
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470

STREET ADDRESS:
1300 I Street
Sacramento, CA 95814
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COMMERCIAL FUNDRAISER FOR CHARITABLE PURPOSES
VEHICLE DONATION PROGRAM

ANNUAL FINANCIAL REPORT FOR 20 05

(California Government Code section 12599)
(11 Cal. Code Regs. section 308)

Failure to file annual financial report by January 30th annually for each calendar year of solicitation may result in late fees as defined in Government Code section 12586.1.

An annual financial report must be filed for each event for each charity solicited for during the previous calendar year.



Name and Address of Commercial Fundraiser for Charitable Purposes:	Name and Address of Charitable Organization:
CF No. <u>606</u>	CT No. <u>30-128</u> F.E.I.N. <u>77-0495472</u>
<u>Penneys Towing</u>	<u>Rotary Club of San Jose</u>
Name of commercial fundraiser for charitable purposes	Name of charity <u>East Equipment Fund</u>
<u>699 The Alameda</u>	<u>10185 No. Stelling Rd.</u>
Address of commercial fundraiser for charitable purposes	Address of charity
<u>San Jose, CA 95126</u>	<u>Cupertino, CA 95014</u>
City, State, and ZIP code of commercial fundraiser for charitable purposes	City, State, and ZIP code of charity

This is wrong.

Figures from (check one): National Campaign ☐ California Campaign ☒
Donated Vehicle Sales held (on) (from) _____
(Type of Activity)

1-1- 20 05, to 12-31- 20 05
(Date or dates must be shown)

1. REVENUE

A. Car/Truck Sales

300- A.

B. Boat Sales

_____ B.

C. Other sources: (Specify)

- a. _____
b. _____
c. _____
d. _____

- _____ Ca.
_____ Cb.
_____ Cc.
_____ Cd.

D. TOTAL REVENUE

300- D. ✓

2. EXPENSES

A. Fees or commissions paid by commercial fundraiser for charitable purposes

78- A.

B. Salaries

_____ B.

C. Payroll taxes

_____ C.

D. Employee benefits

_____ D.

E. Towing

50- E.

F. Vehicle repairs

_____ F.

G. Parts

3- G.

H. DMV Fees

3- H.

I. Appraisals

10- I.

J. Detailing

_____ J.

K. Advertising

_____ K.

L. Telephone

_____ L.

M. Other expenses: (Specify)

- a. Insurance/Bonds
b. Postage
c. Rent - Storage
d. _____

- 19- Ma.
2- Mb.
10- Mc.
_____ Md.

N. TOTAL EXPENSES

175- N.

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3. Distribution or net to charitable organization 125- 3.
4. Less additional expenses relating to operation of vehicle donation program paid by charity 4.
5. Total amount charity realized from operation of vehicle donation program 125- 5. ✓
6. (a) Is any director, officer, or employee of the commercial fundraiser for charitable purposes a director, officer, or employee of the charitable organization listed in this report?

☐ Yes ☒ No If "yes," complete the following:

Name and address of director, officer or employee of commercial fundraiser for charitable purposes	Name and address of charitable organization	Relationship of director, officer, or employee to charitable organization

- (b) For each affiliation identified in 6(a), attach copy of the contract between the commercial fundraiser for charitable purposes and the charity.

Under penalties of perjury, I declare that I have examined this report, including accompanying documents, schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete.